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EXTENDED TO NOVEMBER 15, 2017 Return of Private Foundation

Form **990-PF**

or Section 4947(a)(1) Trust Treated as Private Foundation

Department of the Treasury Internal Revenue Service

▶ Do not enter social security numbers on this form as it may be made public
 ▶ Information about Form 990-PF and its separate instructions is at www.irs gov/form990pf.

OMB No 1545-0052

For calendar year 2016 or tax year beginning		, and ending		
Name of foundation			A Employer identification	number
BAYCARE CLINIC FOUNDATION,			39-2000503	
Number and street (or P O box number if mail is not delivered to street 164 NORTH BROADWAY	t address)	Room/suite	B Telephone number 920-490-90	4.6
City or town, state or province, country, and ZIP or foreign p	nostal code		C If exemption application is p	
GREEN BAY, WI 54303	003141 0000		i exemption application is p	ending check here
G Check all that apply. Initial return	Initial return of a fo	rmer public charity	D 1 Foreign organizations	s, check here
Final return	Amended return		2. Foreign organizations me	eting the 85% test
Address change	Name change		Foreign organizations me check here and attach co	impulation
H Check type of organization: X Section 501(c)(3) e: Section 4947(a)(1) nonexempt charitable trust	xempt private foundation Other taxable private founda	tion	E If private foundation sta under section 507(b)(1)	
I Fair market value of all assets at end of year J Account		X Accrual	F If the foundation is in a	
· 1	ther (specify)		under section 507(b)(1)	
▶\$ 321,302. (Part I, colu	ımn (d) must be on cash l	pasis)		
Part I Analysis of Revenue and Expenses (The total of amounts in columns (b) (c) and (d) may not necessarily equal the amounts in column (a))	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
1 Contributions, gifts, grants, etc , received	238,104.			
2 Check If the foundation is not required to attach Sch. 8 Interest on savings and temporary				
3 cash investments 4 Dividends and interest from securities	2,725.	2,725.		STATEMENT 1
5a Gross rents		27.231		
b Net rental income or (loss)				
6a Net gain or (loss) from sale of assets not on line 10 B Gross sales price for all assets on line 6a	-			
b Gross sales price for all assets on line 6a 7 Capital gain net income (from Part IV line 2)		0.		
8 Net short-term capital gain				
9 Income modifications Gross sales less returns 10a and allowances				
 				
b Less Cost of goods sold c Gross profit or (loss)		<u> </u>		
11 Other income				
12 Total Add lines 1 through 11 REC	-1/240.829.	2,725.	0.	
13 Compensation of officers directors trustees etc	<u> </u>	0.	0.	0.
14 Other employee salaries and wades: SEP 2	5 2017 8			
16a Legal fees	182 H			
Ž E LAnnustras tona	IN OF			
17 Interest	10		ļ	
17 Interest 18 Taxes STMT 2 19 Depreciation and depletion 20 Occupancy 21 Travel, conferences, and meetings 22 Printing and publications 23 Other expenses STMT 3 24 Total operating and administrative expenses. Add lines 13 through 23	46.	0.	0.	0.
19 Depreciation and depletion 20 Occupancy		_ 		
21 Travel, conferences, and meetings				
22 Printing and publications				
23 Other expenses STMT 3	897.	224.	0.	673.
24 Total operating and administrative	943.	224.	0.	672
expenses. Add lines 13 through 23 25 Contributions, gifts, grants paid	232,810.	424.	- 0.	673. 237,810.
26 Total expenses and disbursements	232,010			237,010:
Add lines 24 and 25	233,753.	224.	0.	238,483.
27 Subtract line 26 from line 12:				
Excess of revenue over expenses and disbursements	7,076.	2 501		
b Net investment income (if negative enter -0-) c Adjusted net income (if negative enter -0-)		2,501.	0.	
623501 11-23-16 HA For Paperwork Reduction Act Notice	e see instructions		2 2/2	Form 990-PF (2016)

Pai	Balance Sheets Atlached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year	End of y	
Pai	column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1 Cash - non-interest-bearing	173,984.	163,134.	163,134.
	2 Savings and temporary cash investments	15,098.	15,113.	15,113.
	3 Accounts receivable ►			
	Less: allowance for doubtful accounts			
-	4 Pledges receivable ►			
	Less; allowance for doubtful accounts			
	5 Grants receivable			
	6 Receivables due from officers, directors, trustees, and other			
	disqualified persons			
	7 Other notes and loans receivable			
	Less allowance for doubtful accounts			
ts	8 Inventories for sale or use			
Assets	9 Prepaid expenses and deferred charges			
⋖ 1	Oa Investments - U.S. and state government obligations			
	b Investments - corporate stock STMT 5	121,823.	143,055.	143,055.
1	c Investments - corporate bonds			
1	1 Investments land, buildings and equipment basis			
- }	Less accumulated depreciation			
1	2 Investments - mortgage loans			
	3 Investments - other			
1	4 Land, buildings, and equipment basis ►			
	Less accumulated depreciation			_
	5 Other assets (describe ►)			<u> </u>
1	6 Total assets (to be completed by all filers - see the			
\perp	instructions. Also, see page 1, item 1)	310,905.	321,302.	321,302.
1	7 Accounts payable and accrued expenses	7,000.	12,000.	
1	8 Grants payable	20,000.	10,000.	
<u>8</u> 1	9 Deferred revenue			
Liabilities	Loans from officers directors trustees and other disqualified persons			
.ig 2	1 7			
_ 2	2 Other liabilities (describe >)			
		27 000	22 000	
$\frac{1^2}{1}$	Total liabilities (add lines 17 through 22) Foundations that follow SFAS 117, check here	27,000.	22,000.	
	Touristations that follow of Ao 117, should here			
ς .	and complete lines 24 through 26 and lines 30 and 31.			
21	4 Unrestricted			
ala	5 Temporarily restricted			
	6 Permanently restricted Foundations that do not follow SFAS 117, check here			
ᆵᅵ	·			
٦ ا	and complete lines 27 through 31 7 Capital stock, trust principal, or current funds	0.	0.	
ets 2		0.	0.	
Net Assets or Fund		283,905.	299,302.	
et /	O Total net assets or fund balances	283,905.	299,302.	
z '	o Total het assets of fullo balances	203,303.	233,3021	
١	1 Total liabilities and net assets/fund balances	310,905.	321,302.	
			321,3021	
Pai	t III Analysis of Changes in Net Assets or Fund B	alances		
1 To	tal net assets or fund balances at beginning of year - Part II, column (a), line	30		
	nust agree with end-of-year figure reported on prior year's return)	00	1	283,905.
	ter amount from Part I, line 27a		2	7,076.
	her increases not included in line 2 (itemize)	SEE STA	TEMENT 4 3	8,321.
	d lines 1, 2, and 3		4	299,302.
	creases not included in line 2 (itemize)		5	0.
	tal net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	olumn (b), line 30	6	299,302.

Form **990-PF** (2016)

(a) List and descr	ibe the kind(s) of proper rehouse; or common sto		tincome	(b) How acquired P - Purchase D - Donation		acquired lay, yr)	(d) Date sold (mo., day, yr)
1a							
b NOI	NE		·—				
С							
e				<u></u>			
(e) Gross sales price	(f) Depreciation allo (or allowable)		st or other basis expense of sale			iain or (loss) s (f) minus (
a							
b							
С	<u> </u>						
đ							
е			-				
Complete only for assets showing				┙.		Col. (h) gain	
(ı) F.M V. as of 12/31/69	(j) Adjusted bas as of 12/31/69		cess of col. (i) col. (j), if any	C		not less thar (from col (l	
a							
b							
С							
d							
e							
2 Capital gain net income or (net cap		, also enter in Part I, line s), enter -0- in Part I, line		} 2			
3 Net short-term capital gain or (loss	s) as defined in sections						
If gain, also enter in Part I, line 8, o If (loss), enter -0- in Part I, line 8				3			
	· · · · · · · · · · · · · · · · · · ·	0(e) for Reduced			come		
(For optional use by domestic private	foundations subject to the	ne section 4940(a) tax or	i net investment in	icome.)			
If section 4940(d)(2) applies, leave th	ıs part blank.						
Was the foundation liable for the secti If "Yes," the foundation does not quali	fy under section 4940(e)	. Do not complete this pa	art.				Yes X No
1 Enter the appropriate amount in e	ach column for each yea	r; see the instructions be	fore making any e	ntries.	 -		7-1
(a) Base period years Calendar year (or tax year beginnin	g in) Adjusted qu	(b) alifying distributions	Net value of no	(c) incharitable-use asse		Dıstrıb (col (b) dıvı	(d) ution ratio ded by col (c))
2015		253,505.		276,00			.918473
2014		241,440.		235,36			1.025807
2013		251,659.		201,56			1.248525
2012		197,909.		166,96			1.185325
2011		270,376.		155,66	9.		1.736865
2 Total of line 1, column (d)					2		6.114995
3 Average distribution ratio for the 5 the foundation has been in existen	•	e the total on line 2 by 5,	or by the number	of years	3		1.222999
4 Enter the net value of noncharitable-use assets for 2016 from Part X, line 5				4		299,270.	
				_			
5 Multiply line 4 by line 3					5		366,007.
6 Enter 1% of net investment incom	e (1% of Part I, line 27b)				6	<u> </u>	25.
7 Add lines 5 and 6					7		366,032.
8 Enter qualifying distributions from Part XII, line 4				8		238,483.	
If line 8 is equal to or greater than See the Part VI instructions.	line 7, check the box in F	Part VI, line 1b, and comp	olete that part usin	g a 1% tax rate			
623521 11-23-16			·			F	orm 990-PF (2016)

orm 990-PF (2016) BAYCARE CLINIC FOUNDATION, 1	LTD.	39-2000			Page 4
Part VI Excise Tax Based on Investment Income (Section		4948 - see	instru	ictio	ns)
1a Exempt operating foundations described in section 4940(d)(2), check here		1			
Date of ruling or determination letter (attach copy of letter					- 0
b Domestic foundations that meet the section 4940(e) requirements in Part V, check her	e ▶ L and enter 1%	1		_	50.
of Part I, line 27b					
c All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter					_
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations on	lly Others enter -0-)	2			0.
3 Add lines 1 and 2		3			50.
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations of	nly Others enter -0-)	4			0.
5 Tax based on investment income Subtract line 4 from line 3. If zero or less, enter -0-		5			50.
6 Credits/Payments	1 1				
a 2016 estimated tax payments and 2015 overpayment credited to 2016	62	4			
b Exempt foreign organizations - tax withheld at source	6b	_			
c Tax paid with application for extension of time to file (Form 8868)	6c	≟			
d Backup withholding erroneously withheld	6d	_			_
7 Total credits and payments. Add lines 6a through 6d		7			0.
8 Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is	s attached	8			
9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	•	9			50.
10 Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount overpa		10			
11 Enter the amount of line 10 to be: Credited to 2017 estimated tax	Refunded ▶	·			
Part VII-A Statements Regarding Activities					
1a During the tax year, did the foundation attempt to influence any national, state, or local	legislation or did it participate or interve	ne ın	<u> </u>	Yes	
any political campaign?			1a		X
b Did it spend more than \$100 during the year (either directly or indirectly) for political p			1b		Х
If the answer is "Yes" to 1a or 1b, attach a detailed description of the activit	ies and copies of any materials publ	ished or			
distributed by the foundation in connection with the activities					۱.,
c Did the foundation file Form 1120-POL for this year?			10		X
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during					
(1) On the foundation \blacktriangleright \$ (2) On foundation man		<u>•</u>	1		
e Enter the reimbursement (if any) paid by the foundation during the year for political ex	penditure tax imposed on foundation				
managers ▶ \$0.					.,
2 Has the foundation engaged in any activities that have not previously been reported to	the IRS?		2		X
If "Yes," attach a detailed description of the activities					•
3 Has the foundation made any changes, not previously reported to the IRS, in its gover		, or			7.7
bylaws, or other similar instruments? If "Yes," attach a conformed copy of the cl			3		X
4a Did the foundation have unrelated business gross income of \$1,000 or more during the	e year?	N/A	4a		
b If "Yes," has it filed a tax return on Form 990-T for this year?		14 / A	4b		X
5 Was there a liquidation, termination, dissolution, or substantial contraction during the	year ?		5		<u> </u>
If "Yes," attach the statement required by General Instruction T	trad adhara				•
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisf	ned either				
By language in the governing instrument, or By that language in the governing instrument or that no many instrument or the normal or that no many instrument or the normal or the	determ directions that conflict with the et	nto love			
By state legislation that effectively amends the governing instrument so that no man and the severage postures to	datory directions that connect with the St	ate law		х	
remain in the governing instrument?	" normalate Port II and (a) and Port	VI.	7	X	
7 Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes,	" complete Part II, col (c), and Part .	AV.	\ <u>'</u>		
8a Enter the states to which the foundation reports or with which it is registered (see inst	ruotiona)				
WI	ductions)				
b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to	the Attorney Coneral (or decignate)				
of each state as required by General Instruction G? If "No," attach explanation	the Attorney denotal (or designate)		8b	х	
9 Is the foundation claiming status as a private operating foundation within the meaning	of section 4942(1)(3) or 4942(1)(5) for a	alendar	100		
year 2016 or the taxable year beginning in 2016 (see instructions for Part XIV)? If "Ye	177 7 177 7	a.o.noui	9		Х
10 Did any persons become substantial contributors during the tax year? If "Yes " attach a s		STMT 6	10	X	
To Dio any persons become substantial continuators during the tax year. If "Yes" attach a	schedule having their harries and addresses			\ DF	(00 10)

10958 1

Page 5 Part VII-A Statements Regarding Activities (continued) No Yes 11 At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions) 11 Х 12 Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement (see instructions) 12 13 Did the foundation comply with the public inspection requirements for its annual returns and exemption application? 13 Website address ► _WWW.BAYCARE.NET/WEBSITE/ABOUT/500--FOUNDATION/IND Telephone no > 920-490-904614 The books are in care of ▶ MS. VIRGINIA VISSERS ZIP+4 ▶54303 Located at ► 164 NORTH BROADWAY, GREEN BAY, WI 15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here N/A and enter the amount of tax-exempt interest received or accrued during the year 15 16 At any time during calendar year 2016, did the foundation have an interest in or a signature or other authority over a bank, Yes No securities, or other financial account in a foreign country? 16 Х See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the foreign country Part VII-B | Statements Regarding Activities for Which Form 4720 May Be Required File Form 4720 if any item is checked in the "Yes" column, unless an exception applies Yes No 1a During the year did the foundation (either directly or indirectly) Yes X No (1) Engage in the sale or exchange, or leasing of property with a disqualified person? (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) Yes X No a disqualified person? Yes X No (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes X No (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? (5) Transfer any income or assets to a disqualified person (or make any of either available Yes X No for the benefit or use of a disqualified person)? (6) Agree to pay money or property to a government official? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a period after Yes X No termination of government service, if terminating within 90 days.) b If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations N/A section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)? 1b Organizations relying on a current notice regarding disaster assistance check here c Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected Х before the first day of the tax year beginning in 2016? 1c 2 Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)) a At the end of tax year 2016, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning hefore 2016? b Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach N/A statement - see instructions.) 2b c if the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here 3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? b If "Yes," did it have excess business holdings in 2016 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, N/A Form 4720, to determine if the foundation had excess business holdings in 2016) 3b X 4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? 4a b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2016? Х

Total. Add lines 1 through 3

F	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign fou	ndations,	, see instructions)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes		
а	Average monthly fair market value of securities	1a	131,850.
b	Average of monthly cash balances	1b	171,977.
С	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d	303,827.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) 1e 0.	{	
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	303,827.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	4,557.
5	Net value of noncharitable-use assets Subtract line 4 from line 3. Enter here and on Part V, line 4	5	299,270.
6	Minimum investment return. Enter 5% of line 5	6	14,964.
F	Tart XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations are foreign organizations check here in and do not complete this part)	id certain	
1	Minimum investment return from Part X, line 6	1	14,964.
2a	Tax on investment income for 2016 from Part VI, line 5		
b		1	
C	Add lines 2a and 2b	2c	50.
3	Distributable amount before adjustments Subtract line 2c from line 1	3	14,914.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	14,914.
6	Deduction from distributable amount (see instructions)	6	0.
7	Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	14,914.
F	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
' ^		1a	238,483.
a	Program-related investments - total from Part IX-B	1b	230,403.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	<u> </u>
3	Amounts set aside for specific charitable projects that satisfy the:		
	Suitability test (prior IRS approval required)	3a	
a b		3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	238,483.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		230,403.
J	income. Enter 1% of Part I, line 27b	5	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	238,483.
U	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation (
	4940(e) reduction of tax in those years.	444mi65 10	30000011

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2015	(c) 2015	(d) 2016
1 Distributable amount for 2016 from Part XI,				
line 7				14,914.
2 Undistributed income, if any as of the end of 2016				
a Enter amount for 2015 only			0.	
b Total for prior years:		_		
 ', ',		0.		
3 Excess distributions carryover, if any, to 2016				
a From 2011 262, 593.				
bFrom 2012 189,586.				
cFrom 2013 241,611.				
dFrom 2014 229, 711.				
eFrom 2015 239,750.	1 162 251			
f Total of lines 3a through e	1,163,251.			
4 Qualifying distributions for 2016 from				
Part XII, line 4 ►\$ 238, 483.			_	
a Applied to 2015, but not more than line 2a			0.	
b Applied to undistributed income of prior		0		
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus	0.			
(Election required - see instructions) d Applied to 2016 distributable amount	0.			14 014
_'''	223,569.			14,914.
e Remaining amount distributed out of corpus 5 Excess distributions carryover applied to 2016	0.	-		
(If an amount appears in column (d) the same amount must be shown in column (a))				0.
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c and 4e Subtract line 5	1,386,820.			
b Prior years' undistributed income. Subtract				
line 4b from line 2b		0.		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b Taxable			·	
amount - see instructions		0.		
e Undistributed income for 2015 Subtract line				
4a from line 2a Taxable amount - see instr			0.	
f Undistributed income for 2016. Subtract				
lines 4d and 5 from line 1 This amount must				}
be distributed in 2017				0.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3) (Election				í
may be required - see instructions)	0.			
8 Excess distributions carryover from 2011	262 502			
not applied on line 5 or line 7	262,593.			
9 Excess distributions carryover to 2017.	1 124 227			
Subtract lines 7 and 8 from line 6a	1,124,227.			
O Analysis of line 9: a Excess from 2012 189,586.				
a Excess from 2012 189,586. b Excess from 2013 241,611.				
c Excess from 2014 229, 711.				
dExcess from 2015 239, 750.				
e Excess from 2016 223, 569.				
220,505.		<u></u>		

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Form **990-PF** (2016)

3 Grants and Contributions Paid During the		Payment		
Recipient	If recipient is an individual,	T	5	
Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a Paid during the year				
SEE ATTACHMENT	NONE	EXEMPT	CHARITABLE PURPOSES OF	
SEE ATTACHMENT			THE RECIPIENT	
SEE ATTACHMENT, WI 99999		 		237,810.
		 		
		<u> </u>		
Total			▶ 3a	237,810.
b Approved for future payment				
SEE ATTACHMENT	NONE	ЕХЕМРТ	CHARITABLE PURPOSES OF	
SEE ATTACHMENT			THE RECIPIENT	
SEE ATTACHMENT 99999	 	 		12,000.
Total			▶ 3b	12,000. rm 990-PF (2016)
			10	m 330-PF (2016)

Part XVI-A	Analysis of Income-Produ	cing Activities

Enter gross amounts unless otherwise indicated	Unrelated b	usiness income		y section 512 513 or 514	(e)
Ç	(a) Business	(b) Amount	(C) Exclu- sion	(d)	Related or exempt
1 Program service revenue	code		code	Amount	function income
a	_				
b	_				
C	_				
d	_				
e	_				
f					
g Fees and contracts from government agencies					<u> </u>
2 Membership dues and assessments					
3 Interest on savings and temporary cash investments				_	
4 Dividends and interest from securities			14	2,725.	_
5 Net rental income or (loss) from real estate:					
a Debt-financed property					
b Not debt-financed property					
6 Net rental income or (loss) from personal					
property					_
7 Other investment income					
8 Gain or (loss) from sales of assets other than inventory					
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue:		-			····
a	_	_			
b					
c					
d			_		
е					
12 Subtotal. Add columns (b), (d), and (e)			0.	2,725.	0.
13 Total. Add line 12, columns (b), (d), and (e)				13	2,725.
(See worksheet in line 13 instructions to verify calculations.)				
Part XVI-B Relationship of Activities	to the Accom	plishment of	Exempt P	urposes	
Line No Explain below how each activity for which in	come is reported in c	olumn (e) of Part XV	/I-A contributed	importantly to the accomp	lishment of

	the foundation's exempt purposes (other than by providing funds for such purposes)	
	NOT APPLICABLE	
623621 11	122.16	Form 990-PF (2016

Part XV	Information Re Exempt Organ	-	nsters to a	ind Transactions ai	na Relations	iips with None	cnaritable	•	
1 Did the	e organization directly or indir		v of the followin	a with any other arganization	described in section	on 501(c) of		Yes No	_
	de (other than section 501(c)		-		_	30 1(0) 01		100 110	<u>_</u>
	ers from the reporting founda				ations.				
		ation to a nonchari	table exempt of	ganization of			1a(1)	l x	
(1) C:							1a(1)	$-\frac{1}{x}$	
	ther assets						10(2)	- ^	_
	transactions.	Lla					15/1)	x	
	ales of assets to a noncharital	· -					1b(1)	$\frac{\hat{x}}{x}$	
	urchases of assets from a nor	•	organization				1b(2)	$\frac{\lambda}{X}$	_
	ental of facilities, equipment,						1b(3)	X	
	eimbursement arrangements						1b(4)	X	_
• •	oans or loan guarantees						1b(5)	$-\frac{\Lambda}{X}$	
	erformance of services or me	•	-				1b(6)	$\frac{\Delta}{X}$	
	ig of facilities, equipment, ma	•		•	b Ab . f		1c		
or serv	answer to any of the above is vices given by the reporting fon (d) the value of the goods,	oundation If the fo	undation receive		•	-		ers,	
(a)Line no	(b) Amount involved	(c) Name	of noncharitable	exempt organization	(d) Description	of transfers transactions	, and sharing arra	angements	_
			N/A	-					_
									_
									_
									_
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									_
									
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									_
					-				_
									_
	· · · · · · · · · · · · · · · · · · ·				+				—
22 ls the	foundation directly or indirec	the affiliated with to	r related to one	or more tay-evennt organiz	tions described				
	tion 501(c) of the Code (other				ations acserbed		Yes	X No	3
	s," complete the following sch		0/(0// 01 111 3001	3011 027			100	العدا الد	
<u> </u>	(a) Name of org		· · · · · · · · · · · · · · · · · · ·	(b) Type of organization		c) Description of relat	tionship		_
	N/A	· .		.,		·	<u> </u>	•	_
									_
									_
									_
•									
Sign Here	nder penalties of perjury, I declare and belief it is true correct and correct	mplete Declaration of		n taxpayer) is based on all informa 9/11/2017		has any knowledge	May the IRS direturn with the shown below (XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	preparer	, י
	Print/Type preparer's na		Preparer's s	Date		Check If P	TIN		_
	Fillio Type preparer 5 na	affic	Fiehalei 2 2			self- employed	TIN		
Paid	DANIEL J.	VOLING	יש דוא ברו	J. YOUNG	08/28/17	' '	P00035	195	
Prepare			PUNTER	O. TOUNG /	00/20/1/	Firm's EIN ► 39			_
Use On		THUR DC				I IIIII SEIN P 33	11 /J1.	- -	
	Firm's address ▶ P.	O. BOX 2	3819						_
		EEN BAY		05-3819		Phone no (92	0) 436.	_ 7800	

Schedule B

(Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

► Attach to Form 990, Form 990-EZ, or Form 990-PF. ▶ Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at www.irs.gov/form990 .

OMB No 1545-0047

Employer identification number

BA	AYCARE CLINIC FOUNDATION, LTD.	39-2000503					
Organization type (check of							
Filers of.	Section:						
Form 990 or 990-EZ	501(c)() (enter number) organization						
4947(a)(1) nonexempt charitable trust not treated as a private foundation							
	527 political organization						
Form 990-PF	X 501(c)(3) exempt private foundation						
	4947(a)(1) nonexempt charitable trust treated as a private foundation						
	501(c)(3) taxable private foundation						
, ,	s covered by the General Rul e or a Special Rule.)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Ru	ile See instructions					
General Rule							
· ·	n filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling one contributor. Complete Parts I and II. See instructions for determining a contributor	•					
Special Rules							
sections 509(a)(1) any one contribute	n described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount, line 1 Complete Parts I and II	or 16b, and that received from					
For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals Complete Parts I, II, and III							
For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year.							
but it must answer "No" or	nat isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Fin Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its Found the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)	· · · · · · · · · · · · · · · · · · ·					

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2016)

Employer identification number

BAYCARE CLINIC FOUNDATION, LTD.

39-2000503

DATCA			-2000303
Part I	Contributors (See instructions) Use duplicate copies of Part I if additi	onal space is needed	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	DR. AND MRS. KEVIN WIENKERS 2863 CIRCLE SHORE DR. GREEN BAY, WI 54302		Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	DR. SCOTT GAGE	_	Person X
	3071 GOTHIC COURT	s30,000.	Payroll Noncash
	GREEN BAY, WI 54313	-	(Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3	DR. STEPHEN BRADA 700 TERRAVIEW DRIVE GREEN BAY, WI 54301	\$\$	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4	DR. PAUL SUMMERSIDE 614 RANDALL AVE DE PERE, WI 54115	- s6,500.	Person X Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
5	DR. BRUCE NEAL 1515 BRADBURY COURT GREEN BAY, WI 54313	- \$ 7,500.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
6	DR. ALEXANDER ROITSTEIN	_	Person X
	2411 WANDERING SPRINGS CIRCLE GREEN BAY, WI 54311	\$\$	Payroll Noncash (Complete Part II for noncash contributions)

Employer identification number

BAYCARE CLINIC FOUNDATION, LTD.

39-2000503

DAICA	RE CLINIC FOUNDATION, LTD.		-2000503
Part I	Contributors (See instructions) Use duplicate copies of Part I if additional	al space is needed	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7	DR. STEVEN STROMAN 2452 WILDWOOD DRIVE GREEN BAY, WI 54302	\$6,500.	Person X Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
8	NILGUN FRENGELL PO BOX 4347 MONROE, LA 71211	\$5,000.	Person X Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
9	DR. CHRISTOPHER SORRELLS 3317 STAR CREEK CT GREEN BAY, WI 54311	\$8,000.	Person X Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
10	DR. JOSEPH HODGSON 3510 BOWER CREEK ROAD DE PERE, WI 54115	\$8,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
11	DR. LAURA VOGEL-SCHWARTZ 1850 COTTON WOOD CT DE PERE, WI 54115	\$6,900.	Person X Payroll
(a) No	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
12	DR. MICHAEL MEDICH 2940 LUMBER LN GREEN BAY, WI 54313	\$\$ Schedule B (Form	Person X Payroll Noncash (Complete Part II for noncash contributions) 990, 990-EZ, or 990-PF) (2016)

Employer identification number

BAYCA	RE CLINIC FOUNDATION, LTD.	3	9-2000503
Part I	Contributors (See instructions) Use duplicate copies of Part I if	additional space is needed	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
13	DR. JAGDEEP SODHI 3465 WEATHERWOOD LN GREEN BAY, WI 54311	s5,270.	Person X Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		 \$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
622452 10 1		\$	Person Payroll Noncash (Complete Part II for noncash contributions)

Employer identification number

BAYCARE CLINIC FOUNDATION, LTD.

39-2000503

art II	Noncash Property (See instructions) Use duplicate copies of P	art II if additional space is needed	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\ \$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
(a) No. from	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
(a)		(0)	
No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
_			
453 10-18-	.16	Schedule B (Form 9	990, 990-EZ, or 990-PF) (

completing Part III enter the total of exclusively religion Use duplicate copies of Part III if addition (b) Purpose of gift Transferee's name, address, a	(c) Use of gift (e) Transfer of gift	(d) Description of how gift is held
(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
Transferee's name, address, a	(e) Transfer of gift	
Transferee's name, address, a	(e) Transfer of gift	. – – – – – – – – – – – – – – – – – – –
Transferee's name, address, a		
	and ZIP + 4	Relationship of transferor to transferee
(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	(e) Transfer of gift	
Transferee's name, address, a	and ZIP + 4	Relationship of transferor to transferee
(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	(e) Transfer of gift	
Transferee's name, address, a	and ZIP + 4	Relationship of transferor to transferee
(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	(e) Transfer of gift	
Transferee's name, address, a	and ZIP + 4	Relationship of transferor to transferee
	Transferee's name, address, a (b) Purpose of gift Transferee's name, address, a	(e) Transfer of gift Transferee's name, address, and ZIP + 4 (b) Purpose of gift (c) Use of gift Transferee's name, address, and ZIP + 4 (b) Purpose of gift (c) Use of gift

FORM 990-PF DIVIDEN	DS AND INTER	EST FROM SECU	RITIES ST	TATEMENT 1
GROSS SOURCE AMOUNT	CAPITAL GAINS DIVIDEND			
DIVIDENDS 2,72	5.	0. 2,725.	2,725.	2,725.
TO PART I, LINE 4 2,72	5.	0. 2,725.	2,725.	2,725.
FORM 990-PF	TAX	ES	Si	PATEMENT 2
DESCRIPTION		(B) NET INVEST- MENT INCOME		(D) CHARITABLE PURPOSES
FEDERAL EXCISE TAX	46.	0.	0.	0.
TO FORM 990-PF, PG 1, LN 18	46.	0.	0.	0.
FORM 990-PF	OTHER E	XPENSES	Si	PATEMENT 3
DESCRIPTION	(A) EXPENSES PER BOOKS		(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
ADMINISTRATIVE EXPENSES	897.	224.	0.	673.
TO FORM 990-PF, PG 1, LN 23	897.	224.	0.	673.
FORM 990-PF OTHER INCREASE	S IN NET ASS	ETS OR FUND BA	ALANCES SI	CATEMENT 4
DESCRIPTION	-			AMOUNT
UNREALIZED GAIN/LOSS ON INVE	STMENTS		_	8,321.
TOTAL TO FORM 990-PF, PART I	II, LINE 3			8,321.

FORM 990-PF	CORPORATE STOCK		STAT:	EMENT
DESCRIPTION		BOOK VALUE		MARKET ALUE
VANGUARD BALANCED INDEX FD		143,05	5.	143,05
TOTAL TO FORM 990-PF, PART II	, LINE 10B	143,05	5.	143,05
	SUBSTANTIAL CONTRIE ART VII-A, LINE 10	BUTORS	STAT	EMENT
NAME OF CONTRIBUTOR	ADDRESS		-	
DR. ALEXANDER ROITSTEIN	2411 WANDERIN GREEN BAY, WI		RCLE	
	LIST OF OFFICERS, D AND FOUNDATION MANA		STAT	EMENT
NAME AND ADDRESS	TITLE AND AVRG HRS/WK	COMPEN-	EMPLOYEE BEN PLAN CONTRIB	EXPENSE
JOSEPH HODGSON, M.D. 164 NORTH BROADWAY GREEN BAY, WI 54303	DIRECTOR/PRESI	DENT 0.	0.	(
MICHAEL MEDICH, M.D. 164 NORTH BROADWAY	DIRECTOR 0.50			
	0.50	0.	0.	(
GREEN BAY, WI 54303 BRUCE NEAL, M.D. 164 NORTH BROADWAY	DIRECTOR/VICE 0.50		0.	
GREEN BAY, WI 54303 BRUCE NEAL, M.D. 164 NORTH BROADWAY GREEN BAY, WI 54303 CHRISTOPHER SORRELLS, M.D. 164 NORTH BROADWAY GREEN BAY, WI 54303	DIRECTOR/VICE	PRESIDENT 0.		

BAYCARE CLINIC FOUNDATION, LTD.			39-2000	503
LESLEY O'CONNELL 164 NORTH BROADWAY GREEN BAY, WI 54303	DIRECTOR/EMPLOYEE REP 0.50	0.	0.	0.
PAUL LUIKART, M.D. 164 NORTH BROADWAY GREEN BAY, WI 54303	DIRECTOR 0.50	0.	0.	0.
TOTALS INCLUDED ON 990-PF, PAGE 6	, PART VIII	0.	0.	0.
	XV - LINE 1A COUNDATION MANAGERS		STATEMENT	8

NAME OF MANAGER

JOSEPH HODGSON, M.D. BRUCE NEAL, M.D. CHRISTOPHER SORRELLS, M.D. FORM 990-PF

GRANT APPLICATION SUBMISSION INFORMATION PART XV, LINES 2A THROUGH 2D

STATEMENT

9

NAME AND ADDRESS OF PERSON TO WHOM APPLICATIONS SHOULD BE SUBMITTED

ANN SEIDL 164 N BROADWAY GREEN BAY, WI 54303

TELEPHONE NUMBER

NAME OF GRANT PROGRAM

920-405-5382

GENERAL GRANTS FOR COMMUNITY-BASED PROGRAMS, PROJECTS AND SERVICES

FORM AND CONTENT OF APPLICATIONS

THE FORM FOR COMMUNITY-BASED PROGRAMS, PROJECTS AND SERVICES CAN BE DOWNLOADED AT

HTTP://WWW.BAYCARE.NET/WEBSITE/ABOUT/500--FOUNDATION/INDEX.ASP

ANY SUBMISSION DEADLINES

DEADLINES FOR GRANT REQUESTS ARE JANUARY 14, APRIL 14, JULY 14 AND OCTOBER 13.

RESTRICTIONS AND LIMITATIONS ON AWARDS

GENERAL FINANCIAL SUPPORT GRANTS MUST RELATE TO THE OVERALL FOUNDATION MISSION OF PROMOTING THE HEALTH AND WELL-BEING OF NORTHEAST WISCONSIN RESIDENTS.

NAME AND ADDRESS OF PERSON TO WHOM APPLICATIONS SHOULD BE SUBMITTED

ANN SEIDL 164 N BROADWAY GREEN BAY, WI 54303

TELEPHONE NUMBER

NAME OF GRANT PROGRAM

920-405-5382

HEALTHCARE SCHOLARSHIP PROGRAM

FORM AND CONTENT OF APPLICATIONS

THE FORM FOR SCHOLARSHIPS CAN BE DOWNLOADED AT HTTP://WWW.BAYCARE.NET/WEBSITE/ABOUT/500--FOUNDATION/INDEX.ASP

ANY SUBMISSION DEADLINES

THE DEADLINE FOR SCHOLARSHIP APPLICATIONS IS APRIL OF EVERY YEAR.

RESTRICTIONS AND LIMITATIONS ON AWARDS

SCHOLARSHIPS ARE AWARDED TO PRE-SELECTED REGIONAL HIGH SCHOOLS AND COLLEGES AND TO SCHOLARS PURSUING ADVANCED EDUCATION IN THE HEALTHCARE FIELD.

BayCare Clinic Foundation EIN: 39-2000503

Part XV - Supplementary Information Grant and Contributions Paid During the Year

Ck#	Recipient Address	Reciplent	Recipient > Poundation < Relationship Status > \$	Propertion	Αm	Amount	Date
7 American Cancer Society	P O Box 630353, Cincinnati, OH 45263-0353		Public Chanty	General Operations	s	100 00	1/8/2016
3258 American Red Cross	515 Washburn Street, Oshkosh, WI 54904	None	Public Chanty	General Operations	s	100 00	1/8/2016
3259 ASCRS Foundation	4000 Legato Road STE 700, Fairfac, VA 22033-9937	None	Public Charity	General Operations	s	200 00	1/8/2016
3260 Bellin College of Nursing	725 S Webster Ave, Green Bay, WI 54305	None	Public Chanty	Education	s,	200 00	1/8/2016
3261 Bishop's Appeal Catholic Diocese Catholic Foundation,	P O Box 23001, Green Bay, WI 54305-3001	None	Public Chanty	General Operations	s,	1,000 00	1/8/2016
	1870 Cofrin Drive, Green Bay, WI 54302	None	Public Charity	General Operations	s,	100 00	1/8/2016
	P O Box 5322, Madison, WI 53705-0332	None	Public Chanty	General Operations	ب	100 00	1/8/2016
	P O Box 65, Sturgeon Bay, WI 54235	None	Public Chanty	General Operations	n •	00 00	1/8/2016
	P O Box 22308, Green Bay, WI 34303-2308	None	Public Charity	General Operations	٠.	250.00	1/8/2018
	TO BOX 22300, OTERIDAY, WI 34303-2300	None	Public Chanky	General Operations		2000	1/8/2016
2269 Carata Cana Base Dahim for Unmanity	659 beach offeet, san francisco, CA 94 109-1536 D D Dow 10363 Green Boy Mil 54307	NOD O	Public Charity	General Operations	• •	100 001	1/8/2016
	TO BOX IOCOS, Green Bay, vi 0430/	None	Public Chanty	Education		0000	1/8/2016
5259 Green bay Area Camplic Education	1007 Metudg Street, Oreen bay, VI 34303	None None	Public Chanty	Education		00000	1/8/2016
	D D Box 134 Immethon M/ S2554	None	Public Charty	Education		100 00	1/8/2016
	301 Mather Street Green Bay WI 54303	None	Public Chanty	General Operations	• • •	100 00	1/8/2016
	P.O. Box 12647 Green Bay WI 54307	None	Public Chanty	General Operations	• • •	100 00	1/8/2016
	P.O. Box 1086. Waukesha WI 53187-1086	None	Public Chanty	General Operations	· vs	100 00	1/8/2016
	1529 Leo Frigo Way, Green Bay, WI 54302	None	Public Charity	General Operations	s	100 00	1/8/2016
	1529 Leo Frigo Way, Green Bay, WI 54302	None	Public Charity	General Operations	s	00 000'1	1/8/2016
	W4351 Peninsula Players Rd, Fish Creek, WI S4212-9725	None	Public Chanty	General Operations	s	100 00	1/8/2016
	P O Box 340, Ephraim, WI 54211	None	Public Chanty	General Operations	s	100 00	1/8/2016
	2401 Deckner Ave, Green Bay, WI 54302	None	Public Chanty	General Operations	۰,	200 00	1/8/2016
3280 Prevent Blindness-Wisconsin	759 North Milwaukee St STE 305, Milwaukee, WI 53202-3745	None	Public Chanty	General Operations	٠,	100 00	1/8/2016
3281 Research to Prevent Blindness	645 Madison Ave, New York, NT 1002-1010	None	Public Chanty	General Operations	s	150 00	1/8/2016
3282 Salvation Army	P O Box 11243, Green Bay, WI 54307-1243	None	Public Chanty	General Operations	s	100 00	1/8/2016
3283 SEE International	5638 Hollister Ave, STE 210, Sanata Barbara, CA 93117	None	Public Chanty	General Operations	v.	200 00	1/8/2016
	P O Box 1593, Green Bay, WI 54305-1593	None	Public Chanty	General Operations	v. •	1,000 00	1/8/2016
	P O Box 774, Berkeley, CA 94701-0774	None	Public Chanty	Education	۸ ،	1,000 00	1/8/2016
	/U.Z. West Johnson Street, Madison, WI 53/Ub	None	Public Charly	Education	n 1	2000	1/8/2016
	7 U BOX 766U, VIIIWAUKE; VVI 332/6-06U/	None None	Public Chank	Education	· ·	1,000	1/8/2016
3289 University of Wisconsin-La Crosse 3289 University of Wisconsin-Madison	1/25 State Street, te closses, velocities SOOT Incoln Drive Madison WI 53706	e e c N	Public Chanty	Education	. 47	00 000 1	1/8/2016
	800 Algoma Boulevard, Oshkosh, WI 54901	None	Public Chanty	Education	· vs	00 000'1	1/8/2016
	1 University Plaza, Platteville, WI 53818-3099	None	Public Chanty	Education	v	1,000 00	1/8/2016
3292 Wisconsin Public Radio	821 University Ave, Madison, WI 53706	None	Public Chanty	General Operations	₩.	100 00	1/8/2016
3293 St Bernard Congregation	1040 Hillside LN, Green Bay, WI 54302-4098	None	Public Chanty	General Operations	s	200 00	1/8/2016
	P O Box 1148, La Crosse, WI 54602-1148	None	Public Chanty	Education	••	1,000 00	1/8/2016
	P O Box 1881, Milwaukee, Wi 53201-1881	None	Public Chanty	Education	v ·	1,000 00	1/22/2016
	P O Box 96929, Washington, DC 20090-6929	None	Public Chanty	General Operations	, ·	1,000 00	1/29/2016
	1050 Bedicent State Rd , 2nd Floor, Princeton, NJ 08540	None	Public Chanty	General Operations	n 4	1,000 00	1/29/2016
3256 Bay Area Humane Society & Animai Sheiter, Inc. 3399 Baare Care 1920 Enathall Driva	LOSU RADIOSON SITURE, Green Day, WI SASUZ Take Forest 11 60045	a do	Public Charity	General Operations	n or	1,000 00	1/29/2016
	414 E Walnut St , Suite 170, Green Bay, WI 54301	None	Public Chanty	General Operations	• •	1,000 00	1/29/2016
3301 Exceptional Equestrians	1130 Orlando Drive, De Pere, WI 54115	None	Public Chanty	General Operations	·s	1,000 00	1/29/2016
	2335 S Webster Avenue, Green Bay, WI 54301	None	Public Chanty	General Operations	5	2,000 00	1/29/2016
	P O Box 22308, Green Bay, WI 54305-2308	None	Public Chanty	General Operations	s	1,000 00	1/29/2016
	110 Grant Street, De Pere, WI 54115	None	Public Chanty	Education	s	1,000 00	1/29/2016
	1120 James Drive, Suite A, Hartland, Wi S3029	None	Public Charity	General Operations	s	1,000 00	1/29/2016
	991 Pilgrim Way, Green Bay, WI 54304	None	Public Chanty	General Operations	ب	200 00	1/29/2016
3307 Wounded Warrior Project	4899 Belfort Road, Suite 300, Jacksonville, Florida 32256	None	Public Chanty	General Operations	v d	00 000 1	1/29/2016
	3002 Bay Settlement Rd, Green Bay, WI 543.1.	None	Public Chanty	Education	vs •	350 00	2/12/2016
3309 Center for Childhood Safety 3310 Creads of Box Boxs Middle Continued Inc	842.5 Military Ave, Green Bay, WI 54304	None	Public Charity	General Operations	, ·	400 00	2/19/2016
	2600 Larson Rd. Green Bay, WI 54303	NOD O	Public Chanty	General Operations	٠.	150.00	2/19/2016
	821 University Ave. Madison, WI 53706	None Pone	Public Charity	General Operations	· ·	2000	2/13/2016
3314 De Pere Track and Cross Country ATTN Cindy Vopal, Treasurer	4095 Three Penny CT, De Pere, WI 54115	None	Public Chanty	Education	• •	1,000 00	2/26/2016

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Part XV - Supplementary Information Grant and Contributions Paid During the Year

Ck #	*	Relations			٠٩ ا	2.6.5	: T. Date
Faith Lutheran Church	2335 5 Webster Avenue, Green Bay, WI 54301	None	Public Chanty	General Operations	₩.	2,000 00	2/26/2016
	Attn Treasurer, 991 Pilgrim Way, Green Bay, WI 54304	None	Public Chanty	General Operations	v, ·	200 00	2/26/2016
	333 Hilltop Drive, Green Bay, WI 54301	None	Public Chanty	General Operations	"	5,000 00	2/26/2016
3318 Ine Ridges sanctuary	P.O. Box 152, balleys harbor, wild-4202	None	Public Chank	General Operations	n v	1,000	3/4/2016
		and N	Public Chank	Education	, ,	20005	3/21/2016
	822 S Webster, De Pere, WI 54115	None	Public Chanty	General Operations	• •	400 00	3/21/2016
	2335 S Webster Avenue, Green Bay, WI 54301	None	Public Chanty	General Operations	s	2,000 00	3/25/2016
3323 Northeast Wisconsin Technical College	2740 Mason St, P O Box 19042, Green Bay, WI 54307-9042	None	Public Chanty	Education	s,	3,500 00	3/25/2016
3324 Pilgrim Congregational Church Attn Treasurer,	991 Pilgrim Way, Green Bay, Wl 54304	None	Public Chanty	General Operations	v	200 00	3/25/2016
	12800 N Lake Shore Drive, Mequon, WI 53097	None	Public Chanty	Education	••	1,000 00	4/11/2016
	2335 5 Webster Avenue, Green Bay, WI 54301	None	Public Chanty	General Operations	٠. ·	2,000 00	4/22/2016
	Attn Treasurer, 991 Pilgrim Way, Green Bay, WI 54304	None	Public Chanty	General Operations	s ·	200 00	4/22/2016
	P O Box 372, Green Bay, WI 54305	None	Public Chanty	General Operations	۸.	1,500 00	4/22/2016
	201 Walnut St, Green Bay, WI 54303	None	Public Chanty	General Operations	v, «	230 00	4/29/2016
	151 Brule Road, De Pere, WI 54115	None	Public Chanty	Education	<i>n</i> u	30000	2/07/9/5
3331 De Pere Hack and Cross Country Arrin Cindy Vopal, Fredsuler	2040 Wileda In Graen Bay WIS420	a do	Public Chanty	General Operations	· •	200005	5/6/2016
	Description of the property of	None	Public Chanty	General Operations	•	1.000 00	5/20/2016
	2335 S Webster Avenue, Green Bay, WI 54301	Nane	Public Chanty	General Operations	• •	5,000 00	5/27/2016
	235 N Jefferson St, Green Bay, WI 54301	None	Public Chanty	General Operations	s	200 00	5/27/2016
	991 Pilgrim Way, Green Bay, WI 54304	None	Public Chanty	General Operations	s	200 00	5/27/2016
3339 Wisconsin Public Radio	PO Box 697, Racine, W! 53401	None	Public Chanty	General Operations	s	200 00	5/27/2016
3340 LIVES4218	300 N Broadway, Suite 3A, Green Bay, WI 54303	None	Public Chanty	General Operations	v	405 00	6/3/2016
3341 All Saints Parish	145 St Claude St, Denmark, WI 54208	None	Public Chanty	General Operations	\$	1,000 00	6/10/2016
	late, PO Box 50035, Prescott, AZ 86304	None	Public Chanty	General Operations	w.	5,000 00	6/17/2016
	904 S Taylor St #100, Green Bay, WI 54303	None	Public Chanty	General Operations	v, d	1,000 00	6/17/2016
	2335 S Webster Avenue, Green Bay, WI 54301	None	Public Charity	General Operations	۸.	00 000,5	6/24/2016
	991 Prigrim way, Green Bay, WI 34304	None	Public Charity	General Operations	۰.	0000	6/24/2016
3345 N E W Community Clinic	622 Bodart St, Green Bay, WI 34301	None	Public Chank	General Operations	n v	20 000 00	2/15/2016
334/ Official Congressional Church	Ath Treasurer 991 Pilerim Way, Green Bay, WI 54304	None	Public Chanty	General Operations	• •	200 00	7/22/2016
	PO Box 2114, Oshkosh, WI 54902	None	Public Charity	General Operations	· v	5,000 00	7/22/2016
	3900 Bethel Drive, St Paul, MN 55112	None	Public Charity	Education	•	1,000 00	7/29/2016
	1130 Orlando Drive, De Pere, WI 54115	None	Public Charity	General Operations	\$	200 00	7/29/2016
3352 Golden House	1120 University Ave, Green Bay, WI 54302	None	Public Charity	General Operations	s	215 00	7/29/2016
	One Grand Blvd, DuBourg Hall, Room 121, St Louis, MO 63103	None	Public Charity	Education	v.	1,000 00	7/29/2016
	2420 Nicolet Drive, Green Bay, WI 54311	None	Public Chanty	Education	vs +	1,000 00	7/29/2016
	425 Third St, SW, Suit 800, Washington, DC 20024	None	Public Chanty	General Operations	, ·	3,000 00	8/5/2016
335/ Southwest Poundation for Education and Research Burrell College of Osts 955/ Southwest Poundation for Education and Research Purch.	Uste 3655 Research Drive, Genesis Bidg L, Las Cruces, NM 88003	None	Public Chanty	General Operations	n •	14,000 00	8/5/2016
3359 Soul Lightening International	PO Box 672. Northampton, MA 01060	None	Public Chanty	General Operations	· •	1,000 00	8/19/2016
	110 Grant Street, De Pere, WI 54115	None	Public Chanty	Education	·	15,000 00	8/26/2016
3361 Notre Dame Academy	610 Maryhill Dr, Green Bay, Wl 54303	None	Public Charity	Education	s	25,000 00	8/26/2016
	991 Pilgrim Way, Green Bay, Wl 54304	None	Public Chanty	General Operations	s	200 00	8/26/2016
3363 Viterbo University Attn. Financial Aid,	900 Viterbo Drive, La Crosse, WI 54601	None	Public Charity	Education	· ·	1,000 00	8/26/2016
3364 milisuale conege 3365 Northand Wiccome Technical College Student Engages (Audent	33 C Conege street, milisade, ivi 45242	anon Sock	Public Chanty	Education	n 4	1,000 00	9/2/2016
	P.O. Rox 1892. Houston, TX 77251-1897	e do	Public Chanty	Education	n v	1,000,00	9/2/2016
	400 Third Street, Algoma, WI 54201	None	Public Chanty	General Operations	· v	200 00	9/16/2016
3368 NWTC Educational Foundation	P O Box 19042, Green Bay, WI S4307-9042	None	Public Chanty	Education	s	10,000 00	9/16/2016
3369 Pilgrim Congregational Church Attn Treasurer,	991 Pilgrim Way, Green Bay, WI 54304	None	Public Charity	General Operations	۰,	200 00	9/16/2016
	904 S Taylor St #100, Green Bay, WI 54303	None	Public Chanty	Education	s	1,000 00	9/16/2016
	1848 University Avenue, Madison, WI 53726	None	Public Chanty	Education	s,	4,000 00	9/23/2016
5374 Brown County Breastreeding Coaution	610's Broadway, Green Bay, WI 54303	None	Public Charity	General Operations	и	275 00	9/30/2016
	7 U BOX 28283, Green Bay, WI 34324-0283	None	Public Chanty	General Operations	Λ •	30000	9/30/2016
5370 ALS Association (Visconsin Chapter	5353 N Mayrair Koad, Suite 104, Wauwautosa, WI 53222	None	Public Chanty	General Operations	^	00 00/	10/14/2016

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Part XV - Supplementary Information Grant and Contributions Paid During the Year

Ck#.	Recipient Address	Relationship Toursaudin	hip Tatus	Contribution	Amount	int	Date
Boy Scouts of America	2555 Northern Road, P O Box 267, Appleton, WI 54912	Nane	Public Chanty	General Operations	\$ 1,	1,000 00	10/14/2016
3378 Ribbon of Hope Foundation	100 S Broadway, De Pere, WI 54115	None	Public Chanty	General Operations	\$	2,000 00	10/14/2016
3379 Pilgrim Congregational Church Attn Treasurer,	991 Pilgrim Way, Green Bay, WI 54304	None	Public Chanty	General Operations	s	200 00	10/21/2016
3380 Ribbon of Hope Foundation	100 S Broadway, De Pere, WI 54115	None	Public Chanty	General Operations	•	250 00	10/21/2016
3381 Brown County United Way	P O Box 1593, Green Bay, WI 54305-1593	None	Public Chanty	General Operations	\$	00 000's	10/21/2016
3382 Freedom House Ministries (THRIVE Program)	2997 St Anthony Drive, Green Bay, WI 54311	None	Public Chanty	General Operations	\$	5,000 00	10/31/2016
3383 Notre Dame Academy	610 Maryhill Dr, Green Bay, Wi 54303	None	Public Chanty	Education	s	200 00	11/4/2016
3384 The Plastic Surgery Foundation BRA Fund	444 East Algonquin Rd , Arlington Heights, 1L 60005	None	Public Chanty	General Operations	•^	750 00	11/11/2016
3385 Ribbon of Hope Foundation	100 S Broadway, De Pere, WI 54115	None	Public Chanty	General Operations	\$	00 508,1	11/11/2016
3387 Brown County Oral Health Partnership	331 North Broadway, Green Bay, WI 54303	None	Public Chanty	General Operations	۰,	300 00	11/30/2016
3388 NWTC Educational Foundation	P O Box 19042, Green Bay WI 54307-9042	None	Public Chanty	Education	\$ 2,	200 00	11/30/2016
3389 Pilgrim Congregational Church Attn Treasurer,	991 Pilgrim Way, Green Bay, WI 54304	None	Public Chanty	General Operations	s	200 00	11/30/2016
3390 Bay Area Humane Society & Animal Shelter, Inc	1830 Radisson Street, Green Bay, WI 54302	None	Public Chanty	General Operations	s	100 00	12/16/2016
3391 Family Services	P O Box 22308, Green Bay, WI 54305-2308	None	Public Chanty	General Operations	s	250 00	12/16/2016
3392 Neville Public Museum Foundation	P O Box 325, Green Bay, WI 54305-0325	None	Public Chanty	General Operations	'n	100 00	12/16/2016
3393 New Community Shelter, Inc	301 Mather Street, Green Bay, WI 54303	None	Public Chanty	General Operations	•	250 00	12/16/2016
3394 Paul's Pantry, Inc	1529 Leo Frigo Way, Green Bay, WI 54302	None	Public Chanty	General Operations	\$ 1,	00 000	12/16/2016
3395 Rice University Office of Financial Aid,	P O Box 1892, Houston, TX 77251-1892	None	Public Charity	Education	\$	00 000'1	12/16/2016
3396 Viterbo University Attn Financial Aid,	900 Viterbo Drive, La Crosse, WI 54601	None	Public Charity	Education	\$	00 000'1	12/16/2016
3397 West Africa Foundation	12629 Renton Ave S STE F, Seattle WA 98178	None	Public Chanty	General Operations	\$	00 000	12/16/2016
3398 YWCA of Green Bay-De Pere	230 S Madison Street, Green Bay, WI 54301	None	Public Charity	General Operations	'n	125 00	12/16/2016
3399 Bethel University	3900 Bethel Drive, St Paul, MN 55112	None	Public Chanty	Education	\$	00 000'	12/23/2016
3400 March of Dimes	677 Baeten Road, Suite 100, Green Bay, WI 54304	None	Public Chanty	General Operations	v	325 00	12/23/2016
3401 Pilgrim Congregational Church Attn Treasurer,	991 Pilgrim Way, Green Bay, WI 54304	None	Public Chanty	General Operations	s	200 00	12/23/2016
3402 Saint Louis University	One Grand Blvd, DuBourg Hall, Room 121, St Louis, MO 63103	None	Public Chanty	Education	\$ 1,	00 000'	12/30/2016

\$ 237,810 00

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Part XV - Supplementary Information 2016 Schedule of Donations Accrued in 2016 but paid in 2017

Racipient	Recipient Address	Recipient Relationship	Foundation Status	Purpose of Contribution	Amount	Date
House of Hope Green Bay	1660 Christiana Street, Green Bay, WI 54303	None	Public Charity	General Operations	\$ 10,000.00	1/13/2017
University of Wisconsin- Green Bay	2420 Nicolet Drive, Green Bay, WI 54311	None	Public Charity	Education	\$ 1,000 00	1/27/2017
Hillsdale College	33 E College St, Hillsdale, MI 49242	None	Public Charity	Education	\$ 1,000.00	2/3/2017
•					\$ 12,000,00	۱_